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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/641,431	<b>FILING DATE</b> 08/18/2000 <b>RULE</b> -	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2173	<b>ATTORNEY DOCKET NO.</b> INTL-0434-US (P9442)
<b>APPLICANTS</b> Russella A. Wilson, Boca Raton, FL ; Maria Milenkovic, Phoenix, AZ ; Milan Milenkovic, Phoenix, AZ ;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/213,318 06/22/2000 <i>LVN</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>NONE LVN</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 10/05/2000</b> -				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>LVN</i> Verified and Acknowledged <i>LVN</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 30
				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> Timothy N Trop Trop Pruner & Hu PC Suite 100 8554 Katy Freeway Houston, TX 77024				
<b>TITLE</b> Communicating objects between users or applications				
<b>FILING FEE RECEIVED</b> 948	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 6667

SERIAL NUMBER 09/641,431	FILING DATE 08/18/2000  RULE	CLASS 345	GROUP ART UNIT 2174	ATTORNEY DOCKET NO. INTL-0434-US (P9442)
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## APPLICANTS

Russell A. Wilson, Boca Raton, FL;

Maria Milenkovic, Phoenix, AZ;  
 Milan Milenkovic, Phoenix, AZ;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/213,318 06/22/2000

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/05/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FL	SHEETS DRAWING 12	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 4
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

## ADDRESS

Timothy N Trop  
 Trop Pruner & Hu PC  
 Suite 100  
 8554 Katy Freeway  
 Houston, TX  
 77024

## TITLE

Communicating objects between users or applications

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